

(REFERENCE COPY - Not for submission)

Commercial Broadcast Stations Biennial Ownership Report (FCC Form 323)

File Number:0000229948Submit Date:2023-11-30FRN:0028890416Purpose:Commercial Broadcast Stations Biennial Ownership ReportStatus:ReceivedStatus Date:11/30/2023Filing Status:Active

Section I - General Information

1. Respondent

FRN Entity Name 0028890416 Vision Wyoming LLC

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
8620 Cold Springs Road	Raleigh	NC	27615	+1 (919) 419- 9288	sbrissette@wyrick. com

2. Contact Representative

Name	Organization
Dan Kirkpatrick	Baker & Hostetler LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1050 Connecticut Avenue, NW Suite 1100	Washington	DC	20036	+1 (202) 861- 1758	dkirkpatrick@bakerlaw. com

3. Application Filing Fee

Not Applicable

4. Nature of Respondent

(a) Provide the following information about the Respondent:			
Relationship to stations/permits	Entity required to file a Form 323 because it holds an attributable interest in one or more Licensees		
Nature of Respondent	Limited liability company		

(b) Provide the following information about this report:

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Purpose	Biennial
"As of" date	10/01/2023
	When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report, this date must be Oct. 1 of the year in which this report is filed.

5. Licensee(s) and Station(s)

Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name	FRN
VW License LLC	0029636081

Fac. ID No.	Call Sign	City	State	Service
18286	KTWO-TV	CASPER	WY	DTV
18289	K22CI-D	LANDER	WY	LPT
18290	K35CV-D	SHOSHONI	WY	LPT
18291	K26LW-D	SHERIDAN	WY	LPT
18293	K17JZ-D	BONDURANT	WY	LPT
51607	K30OU-D	CODY, ETC	WY	LPT
60259	K13NZ-D	SHOSHONI	WY	LPT
167559	K09YH-D	SCOTTSBLUFF	NE	LPD
185075	KKTQ-LD	CHEYENNE	WY	LPD
190277	K30MX-D	WYODAK	WY	LPT

Section II – Biennial Ownership Information

1. 47 C.F.R. Section 73.3613 and Other Documents Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. In addition, attributable Local Marketing Agreements (LMAs) and attributable Joint Sales Agreements (JSAs) must be disclosed by the licensee of the brokering station on its ownership report. If the agreement is an attributable LMA, an attributable JSA, or a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents, as well as Licensee Respondents that only hold authorizations for Class A television and/or low power television stations, should select "Not Applicable" in response to this question.

Not Applicable.

2. Ownership Interests (a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, directors, stockholders, non-insulated partners, non-insulated members, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information		
FRN	0028890416	

Entity Name	Vision Wyoming LLC				
Address	PO Box				
	Street 1	8620 Cold Springs Road	8620 Cold Springs Road		
	Street 2				
	City	Raleigh			
	State ("NA" if non-U.S. address)	NC			
	Zip/Postal Code	27615			
	Country (if non-U.S. address)	United States			
Listing Type	Respondent				
Positional Interests (check all that apply)	Respondent				
Tribal Nation or Tribal Entity	Interest holder is not a Tribal	nation or Tribal entity			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%			
	Total assets (Equity Debt Plus)	0.0%			
Does interest holder have an attributable interest in one or more broadcast stations No that do not appear on this report?					

0029640729			
Vision Alaska Television Holdings LLC			
PO Box			
Street 1	8620 Cold Springs Road		
Street 2			
City	RALEIGH		
State ("NA" if non-U.S. address)	NC		
Zip/Postal Code	27615		
Country (if non-U.S. address)	United States		
Other Interest Holder			
Owner			
Interest holder is not a Tribal nation or Tribal entity			
Voting	100.0%	Jointly Held? No	
	Vision Alaska Television Hold PO Box Street 1 Street 2 City State ("NA" if non-U.S. address) Zip/Postal Code Country (if non-U.S. address) Other Interest Holder Owner	Vision Alaska Television Holdirs LLC PO Box Street 1 8620 Cold Springs Road Street 2 random street City RALEIGH State ("NA" if non-U.S. address) NC Zip/Postal Code 27615 Country (if non-U.S. address) United States Other Interest Holder Owner Interest holder is not a Tribal antiton or Tribal entity	

	Equity	100.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an	attributable interest in one or	more broadcast stations	Yes

Ownership Information					
FRN	0019852730				
Name	Stephen C. Brissette				
Address	PO Box				
	Street 1	8620 Cold Springs Road			
	Street 2				
	City	Raleigh			
	State ("NA" if non-U.S. address)	NC			
	Zip/Postal Code	27615			
	Country (if non-U.S. address)	United States			
Listing Type	Other Interest Holder				
Positional Interests (check all that apply)	Other - Manager				
Citizenship, Gender,	Citizenship	US			
Ethnicity, and Race Information (Natural	Gender	Male			
Persons Only)	Ethnicity	Not Hispanic or Latino			
	Race	White			
Interest Percentages (enter percentage values	Voting	0.0%	Jointly Held? No		
from 0.0 to 100.0)	Equity	0.0%			
Total assets (Equity Debt Plus)					
	Does interest holder have an attributable interest in one or more broadcast stationsYesthat do not appear on this report?				
(b) Respondent certifies that any interests, including equity, financial, or voting Yes interests, not reported in this filing are non-attributable.					

If "No," submit as an exhibit an explanation.

that do not appear on this report?

(c) Are any of the individuals listed as an attributable interest holder in the Respondent married to each other No or related to each other as parentchild or as siblings?

If "Yes," provide the following information for each such the relationship.

(d) Is Respondent seeking an attribution exemption for any officer or director with
duties wholly unrelated to the Licensee(s)?NoIf "Yes," complete the information in the required fields and submit an Exhibit fully describing
that individual's duties and responsibilities, and explaining why that individual should not be
attributed an interest.No

Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: Manager Exact Legal Title or Name of Respondent: Vision Wyoming LLC Name: Stephen C Brissette Phone: 9194199288 11/30/2023